PATENT APPLICATION FEE DETERMINATION RECO								^+	piication	OI DC	cket Num	iber :
Effective December 29, 1999									29/6	o(o(022	7
CLAIMS AS FILED - PART I							SMA	LL E	ENTITY		OTHER	
(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA							TYP			OR	SMALL	
					10110		RAT		FEE		RATE	FEE
BASIC FEE			<u> </u>		1 2 -	A STATE	calle de	G,	345.00	OR	-0.4	690.00
TOTAL CLAIMS			37 mini	ıs 20=	1 21/		X\$ 9)=		OR	X\$18=	State
INDEPENDENT CLAIMS				us 3 =	<u>:</u>		X39	=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT							+130	<u>;_</u>		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	٩L		OR	TOTAL	1,356.a
CLAIMS AS AMENDED - PART II								1		-	OTHER	
	No. of The State of the	(Columi		((Column 2) HIGHEST	(Column 3)	SMA	LLE	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINI AFTER AMENDM	NG S	Р	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	**	57	= 0	X\$ 9	=	- .	OR	X\$18=	
	independent	· 3	Minus	••		= 20	X39	=		OR	X78=	
	FIRST PRESE	NTATION (OF MULTIPLE I	DEPEN	DENT CLAIM		+130)==		OR	+260=	
					Q			TAL		00	TOTAL	->
	•	(Columi	n 1)	. (Column 2)	(Column 3)	ADDIT. F	tt I		• • •	ADDIT. FEE	
AMENDMENT B		CLAIM REMAIN AFTEI AMENDM	S ING R	٩	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus .	••		5	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	1 "			X39:	-		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+130	=		OR	+260=	
							TOT ADDIT. F			OR	TOTAL ADDIT. FEE	
	·	(Colum		(Column 2)	(Column 3)						
AMENDMENT C		CLAIM REMAIN AFTEI AMENDM	ING R	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	≣	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	••		=	X\$ 9			OR	X\$18=	
	Independent	•	Minus	•		=	X39=	_		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\dashv	· · · · ·			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								-		OR	+260=	
"If the entry in column 1 is less than the entry in column 2, while 0 in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR TOTAL ADDIT. FEE												
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 12/99)

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